

**Report to Congress by the U.S. Global AIDS Coordinator on the
Involvement of Faith-Based Organizations in Activities of the
Global Fund to Fight AIDS, Tuberculosis, and Malaria**



May 2008

The Administration provides this Report pursuant to Section 625(b) of the Department of State, Foreign Operations, and Related Programs Appropriations Act, 2008 (Division J, Public Law 110-161), which requires the U.S. Secretary of State to submit a report to the Committees on Appropriations “on the involvement of faith-based organizations in Global Fund Programs. The report shall include (1) on a country-by-country basis – (A) a description of the amount of grants and sub-grants provided to faith-based organizations; and (B) a detailed description of the involvement of faith-based organizations in the Country Coordinating Mechanism (CCM) process of the Global Fund; and (2) a description of actions the Global Fund is taking to enhance the involvement of faith-based organizations in the CCM process, particularly in countries in which the involvement of faith-based organizations has been underrepresented.”

Background

Globally, local faith-based organizations (FBOs) remain an underutilized resource for expanding the reach of quality health care. They are among the first responders to community needs, with a reach that enables them to deliver effective interventions for hard-to-reach or underserved populations, such as people living with HIV/AIDS and orphans. FBOs and community-based organizations (CBOs), trained in program management and HIV/AIDS best practices, often design the most culturally appropriate and responsive interventions, and have the legitimacy and authority to implement successful programs that deal with sensitive subjects.

The U.S. government, as the founding and largest donor to the Global Fund to Fight AIDS, Tuberculosis, and Malaria (Global Fund), continues to play a leadership role in ensuring the success of this important international effort. The Global Fund is based on a unique model that relies on partnerships among governments; civil society, including FBOs and CBOs; international organizations; bilateral and multilateral partners; the private sector; and affected communities in the fight against HIV/AIDS, tuberculosis (TB), and malaria. Within the Global Fund architecture, FBOs can engage with Global Fund programs in three primary ways: as members of Country Coordinating Mechanisms (CCMs) or CCM delegations, as Principal Recipients (PRs), or as Sub-Recipients (SRs).

As the Global Fund continues to grow and adjust its systems and requirements to meet its stated goals, the Global Fund reports a focus on increasing the involvement of FBOs in Global Fund grants. Although the proportion of FBOs as a percentage of organizations financed by the Global Fund remains quite low, the Global Fund Secretariat indicates that it is undertaking efforts to increase the role of FBOs in Global Fund programs.

The Global Fund's Executive Director, Professor Michel Kazatchkine, has publicly recognized that FBOs are a "critical component" in the response to disease, and that "FBOs must be an integral part of our work if we truly hope to succeed and defeat these pandemics."¹ Recognizing the need to better engage FBOs for long-term success, the Global Fund reports that it has undertaken various means of expanding outreach and reforming policy

¹ Kazatchkine, Michel. Foreword of "Engaging with the Global Fund to Fight AIDS, Tuberculosis and Malaria: A primer for faith-based organizations." (Friends of the Global Fight, World Vision, and Christian Connections for International Health). 2007.

to facilitate greater partnership with the faith-based community. These include refined CCM guidelines that explicitly mention the importance of FBO representation; conducting outreach and technical workshops for FBOs; producing publications to enhance FBO participation with the Global Fund; and instituting specific grant-management measures to bring in additional non-governmental partners. (Links to the publications may be found in the appendix.)

Country-by-country description of the amount of grants and sub-grants provided to faith-based organizations

To address this question, the Office of the U.S. Global AIDS Coordinator asked the Global Fund Secretariat to provide the requisite data. The Global Fund Secretariat derived this data from a 2006 Principal Recipient Survey, which is the most comprehensive initiative to date to collect information on country-level allocations of disbursed funds. However, the data are not complete, as only 85 percent of all PRs and SRs responded. The Global Fund is currently compiling the 2007 Principal Recipient Survey. In the future, reporting on disbursements to and expenditures from PRs and SRs should be more systematic through the newly required Enhanced Financial Reporting System at the Global Fund Secretariat. (Please refer to the *2008 Report to Congress by the U.S. Global AIDS Coordinator on Oversight Information Pertaining to the Global Fund to Fight AIDS, Tuberculosis and Malaria* for a detailed description of the Enhanced Financial Reporting System.) Once this system is in place within a country, the Global Fund will be able to report on FBOs' receipt of money, drugs, and commodities through Global Fund programs. The Global Fund Secretariat expects to provide initial results from this system in mid to late 2008, and information on the entire Global Fund grant portfolio will be available in early 2009.

From the inception of the Global Fund to the present, eleven different FBOs have served as PRs on Global Fund grants. Based on the 2006 Principal Recipient Survey, the Global Fund reports nine FBOs received funds as PRs in that year, and at least 488 FBOs received funds as SRs; the Global Fund reports that additional FBOs also received funds as sub-SRs, but the survey did not quantify this information. However, additional analysis shows that of the 488 FBO SRs the Global Fund reports received disbursements in 2006, almost half (231) were in Zambia, which leaves only

257 FBO SRs that received disbursements throughout the remainder of the 338 grants in 118 Global Fund countries active at that time.²

Between 2002 and October 2007, the total amount of financing approved by the Global Fund Board for FBO PRs was \$186 million; total disbursements to these PRs totaled \$110 million (Appendix 1). In 2006 alone, disbursements to FBO PRs and SRs totaled \$92 million, or 5.4 percent of all Global Fund disbursements to PRs and SRs in that year. (Please see Appendix 2 for a country-by-country breakdown of disbursements to FBO PRs and SRs for 2006.)

In addition to the monetary grant disbursements to FBOs, bulk purchases of drugs and commodities paid for by Global Fund grants also reached these organizations. In order to gain a better understanding of the quantities of drugs and commodities that go to FBOs across all grants and countries, the Global Fund conducted a field visit to Tanzania in October 2007 to sample the flow of these resources to SRs. The report from this visit indicated FBOs received 31 percent of the total disbursement of the artemisinin-based combination treatment for malaria from Global Fund resources, and the following percentages of other drugs and commodities for the following sites/services: 33 percent for antiretroviral treatment sites, two percent for sites that offer voluntary counseling and testing, 13 percent of motor vehicles, and 46 percent for orphan care (see Appendix 3). The Global Fund therefore concluded from these data that the involvement of FBOs (including resources directed to FBOs) was greater than what the budget submissions to the Global Fund Secretariat reflect.

The Global Fund data highlight a few outstanding examples of countries in which FBOs are particularly involved in the management and implementation of Global Fund grants. In Zambia, the Churches Health Association of Zambia (CHAZ) serves as co-PR on five grants, through which its share of disbursements to date has been over \$70 million. CHAZ then disburses a significant portion of this money to FBO SRs: 411 local FBOs for HIV grants, 73 local FBOs for TB grants, and 75 local FBOs for

² Note: Additional analysis draws on data available from the Global Fund website. According to the site, by the end of 2006 the Global Fund Board had approved a total of 342 grants started in 119 countries (including multi-country programs). However, the 2006 Principal Recipient data from the Global Fund had an 85-percent response rate, so this dataset is not representative of all grants at that time.

malaria grants.³ Globally, World Vision International (an international FBO) functions as a PR in four countries, as a SR in 17 countries (on a total of 22 grants), and serves as a member of the CCM in 11 countries.

Although the strides made by these and a handful of other FBOs in scaling up involvement in Global Fund grants are promising, strong FBO networks in many countries are not yet accessing Global Fund resources. Future reports as a result of the Global Fund Secretariat's Enhanced Financial Reporting System should shed light on the Global Fund's progress in implementing greater FBO participation in programming.

Country-by-country detailed description of the involvement of faith-based organizations in the Country Coordinating Mechanism process of the Global Fund

One of the founding principles of the Global Fund is “country ownership” of programs. In that spirit, the Global Fund recognizes “the importance of national contexts, customs and traditions and therefore does not intend to prescribe specific CCM compositions.”⁴ At the same time, Global Fund grants are also meant to constitute a partnership among all stakeholders in a country, notably including civil society organizations. The Global Fund Board therefore established guidelines that strongly recommend that CCMs broadly represent all national stakeholders, and should include at least 40 percent of the membership from civil society organizations (including FBOs).

The Global Fund Secretariat reported that of the 120 CCMs⁵ for which it was able to access information, 94 (78 percent) had at least one FBO representative. Global Fund data show that, worldwide, FBOs comprise six percent of total CCM membership, although membership varies by region. In Eastern Africa and West and Central Africa, the percentage of FBO representation of total membership is highest at 8.6 percent and 8.5 percent, respectively; in Eastern Europe, the percentage of FBO representation of total membership is the lowest, at 3.2 percent. (See Appendix 4 for a country-by-country breakdown of FBO CCM members.)

³ This number of FBO SRs is a sum total of all FBO SRs over the lifetime of the grants. The previous mention of 231 FBO SRs under CHAZ refers only to the FBOs receiving grants in that particular year. Not all SRs receive separate tranches of grant funding during every year of the grant.

⁴ The Global Fund. “Revised Guidelines on the Purpose, Structure and Composition of Country Coordinating Mechanisms and Requirements for Grant Eligibility.” 2005; Page 4.

⁵ As of April 2008, the Global Fund website lists a total of 130 CCMs.

FBOs are especially active in the health care sector in Sub-Saharan Africa and Latin America and the Caribbean, which could be expected to translate into higher levels of FBO involvement in CCMs in these regions. While the Global Fund Secretariat's data show that, in general, the share of Global Fund finances that goes to FBOs is higher in these regions than in others, FBOs are significantly under-represented in these CCMs relative to the overall share of interventions they provide within the health sector.

Enhancing the involvement of faith-based organizations in the CCM process, particularly in countries in which faith-based organizations have been underrepresented

U.S. government participation in the Global Fund has been instrumental in promoting changes to Global Fund policies and procedures to expand the participation of FBOs and CBOs in the implementation of Global Fund grants. In line with these efforts, the Global Fund Board and Secretariat have taken steps to address the involvement of FBOs and CBOs in Global Fund programs, including by refining CCM guidelines, sponsoring workshops, supporting publications, and instituting new grant-management requirements.

Included in the most recent version of CCM guidelines for Round 8 is an explicit mention of the importance of FBO representation on CCMs. CCMs must consider this guidance seriously as the Global Fund's independent Technical Review Panel will consider CCM composition in the evaluation of future proposals. Text from the revised CCM guidelines appears below:

The membership of the CCM should comprise a minimum of 40 percent representation of the non-government sectors, such as NGOs/community based organizations, people living with the diseases, key affected populations, religious/faith-based organizations, private sector, academic institutions (see Annex 1 on “the types of civil society and private sector representation most relevant to the work of CCMs”).⁶

⁶ Ibid. Page 4.

Within the description of civil-society organizations, the Global Fund Secretariat characterizes religious and faith-based groups as the following:

Religious and Faith-Based Groups: In many settings religious and faith based organizations play a vital role in reaching communities infected and affected by the three diseases. Not only do these organizations and groups provide crucial services but some are instrumental in convincing political leaders at the national, regional and local level to prioritize the needs of affected populations. They are increasingly becoming involved in implementation of interventions and provide a valuable role in the development of effective proposals.⁷

Efforts to Encourage Greater Engagement with FBOs

To help FBOs engage more effectively with CCMs and gain access to Global Fund resources as PRs or SRs, the Global Fund, in coordination with various faith-based institutions, has recently hosted several workshops and events for this audience. In March 2007, the Global Fund Executive Director met with FBO representatives to launch a manual for FBOs to guide them in engaging with the Global Fund. In March 2007, the Global Fund facilitated the launch of a publication intended to provide guidance to entities who might want to collaborate with FBOs on HIV/AIDS projects. In April 2008, the Global Fund sent a representative to the White House Faith-Based and Community Initiatives Conference on African Health Initiatives in Zambia to discuss Global Fund programs with the participants; also in April 2008 the Global Fund convened a workshop in Tanzania with FBOs throughout Sub-Saharan Africa to begin a dialogue on challenges and successes in FBO engagement. A July 2008 Global Fund-led workshop during the Ecumenical Pre-International AIDS Conference in Mexico City will be part of the follow-up to the Tanzania meeting. See Appendix 5 for the Global Fund's brief description of the publications and workshops, as well as links to the publications.

To encourage and strengthen civil-society (including FBO) leadership in managing Global Fund grants, the Global Fund Board established, at its 15th meeting, a dual-track financing system (Appendix 6), which stipulates that Global Fund proposals should include both government and non-

⁷ Ibid. Page 9.

government PRs. The goal of this recommendation is “to increase the representation of civil society organizations across the entire Global Fund portfolio.”

Two upcoming Global Fund workshops focused on scaling up the involvement of FBOs are taking place in the Sub-Saharan Africa and Latin America and the Caribbean regions.

Conclusion

FBOs are already substantially involved in Global Fund programs in a number of countries, in many of which international FBOs are supporting their country offices to gain access to Global Fund resources. It is encouraging that the new Global Fund Executive Director has publicly acknowledged that FBOs must play an integral role in efforts to address the three diseases, and that the Global Fund’s mechanisms have not adequately tapped the capacity of community- and faith-based organizations.

The Global Fund board and secretariat have taken steps to increase the involvement of the faith-based community in Global Fund activities, by encouraging greater representation on CCMs and an increased role in grant implementation. Over the next year, it will be important to: review the initial reports of these initiatives; assess whether dual-track financing positively affects access by FBOs to Global Fund resources; assess whether the Enhanced Financial Reporting System provides a clearer picture of disbursements to FBOs; and assess whether the workshops lead to greater FBO involvement.

The U.S. government, through the Emergency Plan for AIDS Relief (PEPFAR), is also continuing to support initiatives that will encourage increased involvement by FBOs in Global Fund programs. PEPFAR has coordinated with the Global Fund on its FBO conferences, and is working to include Global Fund representation in similar PEPFAR opportunities. More broadly, as PEPFAR continues to expand its partnerships with community- and faith-based organizations, it enhances the technical capacity, organizational development, and networking ability of those organizations – which should enable them to better understand and compete for Global Fund resources. Specific PEPFAR initiatives, such as local capacity-building programs and the New Partners Initiative, emphasize financial management

and donor diversification, so that community and faith-based organizations can gain access to various funding sources, including Global Fund grants.

Appendix 1: Faith-Based Principal Recipient Funding

**Table provided by the Global Fund Secretariat*

Total Amount Approved and Disbursements to Faith-Based Principal Recipients between 2002 and October 1, 2007

Country	Organization	Amount Approved	Amount Disbursed
Armenia	World Vision International – Armenia	\$7,249,891	\$6,475,787
Global	Lutheran World Federation	\$700,000	\$700,000
Guatemala	Fundación Visión Mundial Guatemala	\$58,400,397	\$24,804,504
Madagascar	Catholic Relief Services – Madagascar	\$1,503,624	\$1,503,624
Nigeria	Christian Health Association of Nigeria	\$25,570,061	\$11,101,254
Somalia	World Vision – Somalia	\$13,825,351	\$7,777,694
Sri Lanka	Lanka Jatika Sarvodaya Shramadana Sangamaya	\$7,406,225	\$4,287,322
Suriname	Medische Zending (Medical Mission) – Primary Health Care Suriname	\$4,603,345	\$3,181,216
Thailand	World Vision Foundation of Thailand	\$7,726,767	\$2,401,020
Zambia	The Churches Health Association of Zambia	\$50,903,608	\$46,602,655
Zimbabwe	Zimbabwe Association of Church Related Hospitals	\$12,418,550	\$4,703,030
Total		\$185,704,474	\$110,356,890

Appendix 2: Global Fund funding to Faith-Based Principal Recipients and Sub-Recipients in 2006

**Table provided by the Global Fund Secretariat; data from 2006 Principal Recipient Survey*

Faith-Based Organizations that Received Funding as Global Fund Principal Recipients and Sub-Recipients in 2006⁸

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Algeria	Algerian Muslim Scouts		\$16,082
Angola	Unspecified FBO		\$500,000
Angola	CUAMM (Italian FBO)		\$2,070,440
Armenia	World Vision International – Armenia	\$1,347,316	
Bangladesh	RDRS		\$108,474
Bangladesh	LAMB		\$32,354
Bangladesh	HEED		\$204,814
Bangladesh	Danish-Bangladesh Leprosy Mission		\$57,465
Bangladesh	The Leprosy Mission Bangladesh		\$46,270
Bangladesh	PIME Sisters		\$13,768
Benin	Catholic Relief Services		\$79,266.18
Bolivia	Cuerpo de Cristo		\$11,572
Botswana	BOCAIP		\$37,508
Bulgaria	YMCA Russe		\$21,149.62
Bulgaria	Samaritani Foundation		\$16,562.73
Cambodia	Sihanouk Hospital Center for Hope (SHCH)		\$1,204,613.83
Cambodia	National Pediatric Hospital/World Vision International		\$143,231.67
Cameroon	Association Schilo		\$4,950
Cameroon	Jape Ebamina		\$5,000
Cameroon	CLS-CPS		\$28,280
Cameroon	CDLS (Yokadouma)		\$31,774.20
Cameroon	Hopital Protestant Garoua Boulai		\$4,996
Cameroon	UVRES Sainte Marthe		\$5,497.20
Cameroon	Action Chrétienne pour le Developpement		\$8,320
Cameroon	Fondation BETHLEEM de		\$3,770

⁸ The following countries reported no disbursements to FBO PRs or SRs in 2006 including the People's Republic of China, Lao People's Democratic Republic, Multi-Country Western Pacific, Viet Nam, Burundi, Eritrea, Rwanda, Azerbaijan, Belarus, Croatia, Estonia, Georgia, Kazakhstan, Kosovo, Kyrgyzstan, Macedonia, Moldova, Montenegro, Romanian, Tajikistan, Turkey, Uzbekistan, Argentina, Belize, Chile, Costa Rica, Cuba, El Salvador, Guyana, Panama, Paraguay, Nepal, Afghanistan, Bhutan, Iran, Pakistan, Djibouti, Egypt, Jordan, Mali, Morocco, Yemen, Mozambique, Burkina Faso, Congo, Cote d'Ivoire, Equatorial Guinea, Gabon, Guinea, Sao Tome and Principe.

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
	Mouda		
Cameroon	OSEELC Meiganga		\$5,000
Cameroon	C/S Mission Plein Évangile		\$9,058
Cameroon	Conseil des Eglises Protestantes du Cameroun		\$5,000
Cameroon	One Love Association (P+ Association)/St. Theresa Catholic Medical Centre Mambu-Bafut		\$5,000
Cameroon	Muslim Students Association Bamenda – Cameroon		\$45,466
Cameroon	Catholic Relief Services Cameroon and Diocese of Kumbo Department of Family Life Office		\$13,146
Cameroon	World Health Missionary Service		\$36,000
Cameroon	CBC – Cameroon Baptist Convention		\$43,400
Cameroon	Centre Chrétien de Développement		\$43,723.20
Central African Republic	Association Mama Theresa (AMT)		\$59,470
Central African Republic	CARITAS Bangui		\$404,336
Central African Republic	CARITAS Bambari		\$48,350
Central African Republic	CARITAS Bria		\$47,650
Central African Republic	CARITAS Bosangoa		\$50,069
Central African Republic	CARITAS Bouar		\$54,230
Central African Republic	CARITAS Berberatie		\$42,522
Central African Republic	Société Saint Vincent de Paul (Nola)		\$44,617
Central African Republic	Comité Islamique pour la Lutte contre le Sida (CILS/Mobaye)		\$24,618
Central African Republic	Groupe des Chrétiens pour les Œuvres Sociales (GCOS/Bria)		\$24,635
Central African Republic	Action Chrétienne pour la Compassion (ACC)		\$39,102
Chad	UNAD		\$212,755
Chad	Divers FBOs		\$10,388
Colombia	Parróquia de San Andrés de Tumaco		\$57,477
Colombia	Fé y Alegría Cali		\$139,993
Comoros	MOUFTORAT		\$2,000
Democratic Republic of the Congo	Armée du Salut		\$51,276

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Democratic Republic of the Congo	ECC MERU		\$7,945
Democratic Republic of the Congo	Diócese de Kisantu		\$127,394
Democratic Republic of the Congo	ECC IMA		\$233,751
Democratic Republic of the Congo	CORDAID		\$690,275
Democratic Republic of the Congo	Armée du Salut		\$116,124
Democratic Republic of the Congo	CORDAID		\$53,338
Democratic Republic of the Congo	Catholic Relief Services		\$126,207
Democratic Republic of the Congo	ECC-IMA		\$212,915
Dominican Republic	Pastoral Juvenil		\$135,780
Dominican Republic	Esperanza Internacional		\$44,935
Timor-Leste	Christian Children's Fund		\$43,351.40
Timor-Leste	World Vision International		\$60,449.33
Ecuador	Catholic Relief Services		\$80,082.61
Ethiopia	Ethiopian Orthodox Church		\$76,105.51
Ethiopia	Ethiopian Muslims Development Agency		\$38,994.60
Ethiopia	Christian Relief and Development Association		\$6,139.59
Ethiopia	Afar region sub-recipients – faith-based organizations		\$35,919.81
Ethiopia	Oromia region sub-recipients – faith-based organizations		\$17,816.24
Ethiopia	SNNP region sub-recipients – faith-based organizations		\$28,252.56
Ethiopia	Tigray region sub-recipients – faith-based organizations		\$5,389.88
Gambia	Christian Children's Fund		\$253,500
Gambia	Catholic Relief Services		\$1,054,697
Gambia	Christian Children's Fund		\$95,321
Gambia	Hands on Care		\$361,075
Ghana	Various FBOs		\$1,148,948.34
Ghana	Women in Lord's Vineyard		\$40,000
Ghana	Strong Tower		\$40,000
Ghana	Various FBOs		\$5,310,382.50
Global	Lutheran World Federation	\$115,000	
Guatemala	Fundación Visión Mundial Guatemala	\$11,015,792	

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Guatemala	Asociación CRS		\$74,657
Guatemala	Asociación CRS Hospicio San José		\$50,889
Guinea-Bissau	Community of Sant'Egidio		\$45,000
Guinea-Bissau	Ceu e Terra		\$20,904.32
Haiti	CARITAS		\$95,259.62
Honduras	Penitentiary Pastoral		\$19,024.97
Honduras	Samaritan's Purse		\$110,509.99
India	St. Joseph's Leprosy Hospital and HIV/AIDS Centre		\$32,778
Indonesia	Church World Service		\$27,462
Indonesia	World Vision International		\$259,179
Indonesia	Persatuan Dharma Karya Kesehatan Indonesia (PERDHAKI)		\$31,810
Indonesia	HOPE Worldwide Indonesia		\$27,222
Indonesia	Muhammadiyah		\$156,964
Indonesia	PBNU		\$63,500
Jamaica	Hope Worldwide Jamaica		\$103,732
Jamaica	Whole Life Ministries		\$20,653
Jamaica	Bethel Baptist Church		\$43,311
Jamaica	Campus Crusade for Life		\$8,514
Kenya	Christian Health Association of Kenya (CHAK) (HIV – Round 2)		\$894,084
Kenya	National Council of Churches in Kenya (HIV- Round 2)		\$113,279.72
Kenya	Christian Women Partners (HIV – Round 2)		\$31,289.75
Kenya	Christian Children Fund (Malaria – Round 2)		\$15,408.57
Kenya	World Vision Kenya (Malaria – Round 2)		\$11,070.99
Kenya	NAHWO (Malaria – Round 2)		\$18,081.56
Kenya	NAHWO (Tuberculosis – Round 5)		\$6,327.67
Kenya	Apostles of Jesus AIDS Ministries (HIV – Round 2)		\$27,270 as SR of KANCO SR
Kenya	Christian Children Fund (HIV – Round 2)		\$6,685.60 as SR of KANCO SR
Kenya	Presbyterian Church of East Africa (HIV – Round 2)		\$25,348.55 as SR of KANCO SR
Kenya	St. Margarita Development Centre (HIV – Round 2)		\$24,909.98 as SR of KANCO SR
Kenya	Young Men Christian		\$27,284.23 as

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
	Association (HIV – Round 2)		SR of KANCO SR
Kenya	Christian Health Association of Kenya (CHAK) (Malaria – Round 4)		\$270,340.42
Kenya	Christian Community Services (Malaria – Round 4)		\$1,321.66
Kenya	NAHWO (Malaria – Round 4)		\$23,316.03
Kenya	Christian Children Fund (Malaria – Round 4)		\$43,994.31
Kenya	World Vision Kenya (Malaria – Round 4)		\$50,879.31
Kyrgyzstan	Unspecified FBO		\$8,192
Lesotho	Christian Council of Lesotho; Catholic Relief Services; Christian Association of Lesotho; Scripture Union		\$595,794
Liberia	Christian Health Association of Liberia		\$149,425
Madagascar	Catholic Relief Services - Madagascar	\$378,952.59	
Madagascar	FTK		\$11,665.69
Madagascar	SALFA		\$340,982
Madagascar	SAF/FJKM, SALFA		\$31,500
Madagascar	SALFA		\$166,712
Malawi	Lifeline Malawi; Partners in Hope; Christian Health Association of Malawi (CHAM); Katete AIDS Project; Bowe Home Based Care; Shulutu CBO; Mdabwi CBO; Mother Mary; 23 additional faith-based health facilities		\$221,449 + 23 faith-based health facilities were provided with ARVs; other health products including drugs for opportunistic infections; HIV test kits and medical equipment; and 5 ambulances.
Mauritania	POOLS/ONG/SENLIS		\$354,542
Mongolia	World Vision – Mongolia		\$51,773.70
Multi-Country Americas (Meso)	Visión Mundial w/ ICAS and PASMO		\$625,850
Namibia	Catholic AIDS Action		\$648,934.60
Namibia	Phillipi Trust		\$618,989
Namibia	Council of Churches Namibia		\$385,065.13
Nicaragua	Vicariato		\$56,585
Niger	Fraternité Notre Dame		\$13,980
Niger	Orphelinat Soeurs de		\$8,094

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
	Gethsemani		
Nigeria	Christian Health Association of Nigeria	\$13,285,872	
Nigeria	GLRA		\$616,160
Papua New Guinea	Catholic Health Services		\$269,352
Papua New Guinea	Hope World Wide		\$78,808
Papua New Guinea	Anglicare Stop AIDS		\$125,821
Peru	Centro Parroquial Ecuménico Rosa Blanca		\$228,357
Philippines	World Vision Development Foundation		\$438,814
Russian Federation	Kaliningrad Religious Organization, Catholic Charitable Center Karitas – Zapad		\$38,819
Senegal	ONG Alliance Des Religieux		\$26,217
Senegal	ONG CCF-CAMA		\$26,217
Senegal	ONG World Vision		\$26,217
Sierra Leone	Council of Churches in Sierra Leone		\$47,415
Sierra Leone	World Vision – Sierra Leone		\$84,925
Sierra Leone	Adventist Development Relief Agency		\$38,449
Sierra Leone	Christian Health Association –Sierra Leone		\$25,510
Sierra Leone	United Methodist Church		\$26,702
Sierra Leone	The Shepherd Hospice		\$34,176
Sierra Leone	Young Women Christian Association		\$13,018
Sierra Leone	Council of Churches – Sierra Leone		\$26,858
Sierra Leone	Methodist Church –Sierra Leone		\$29,671
Sierra Leone	Christian Children Fund		\$73,799
Sierra Leone	Catholic Relief Service		\$48,860
Sierra Leone	Sierra Leone Red Cross Society, Action for Development, Christian Children’s Fund and World Vision		\$140,331
Somalia	World Vision International	\$3,158,422.93	\$179,566.83
South Africa	YMCA		\$63,317
South Africa	Youth for Christ – Knysna		\$26,158
South Africa	Youth for Christ – George		\$72,002
South Africa	Nazareth House		\$20,907
South Africa	Living Hope Care Centre		\$232,059
South Africa	CMSR Bethesda Care Centre		\$267,179

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
South Africa	Themba Care Centre		\$64,011
Sri Lanka	Lanka Jatika Sarvodaya Shramadana Sangamaya	\$1,230,490	
Sudan	World Vision International		\$640,270
Sudan	World Vision Equatoria		\$333,678
Sudan	ADRA		\$485,297
Sudan	Diocese of Rumbek		\$39,234
Sudan	World Relief		\$381,585
Sudan	Diocese of Rumbek		\$482,126
Sudan	World Vision International		\$86,707
Sudan	World Relief		\$58,011
Suriname	Medische Zending (Medical Mission) – Primary Health Care Suriname	\$2,376,345.33	\$37,590.33
Swaziland	Hope House; Nazarene Task Force; RFM; Scripture Union; Africa Evangelical; Anglican United Against HIV/AIDS; Church Forum; Parish Nursing; Faith Bible School; Evangelical Church; World Teach; Salvation Army; The Voice of the Church; Shiloh Counseling; Mpolonjeni – Salvation Army; Shewula Nazarene		\$801,917
Tanzania	World Vision (Training and Promotion)		\$310,760.69
Tanzania	CSSC		\$2,186,969
Tanzania	World Vision Tanzania		\$573,553.59
Tanzania	Kanisa Katoliki Na Ukumwi (KAKAU)		\$127,524.68
Tanzania	Christian Social Services Commission		\$769,279
Thailand	NCA		\$524,373
Thailand	World Vision Thailand – Ranong		\$42,004
Thailand	Kwai River Christian Hospital		\$28,741
Thailand	World Vision Thailand – Phangnga		\$33,793.50
Thailand	Thai Catholic Commission for Seafarers		\$70,213.82
Thailand	World Vision Foundation		\$496,570.33
Togo	Unspecified FBO		\$30,300
Uganda	All Saints Cathedral		\$10,726.38
Uganda	Bishop Maseroka		\$40,281.28
Uganda	Christian Children’s Fund		\$462,090.88

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Uganda	Catholic Relief Services		\$410,377.95
Uganda	Deliverance Church Uganda		\$8,825.09
Uganda	Golgotha Mission		\$10,771.32
Uganda	Inter-Religious Council		\$494,709.74
Uganda	Islamic Medical Association		\$61,647.59
Uganda	Lutheran World Federation		\$60,112.61
Uganda	Mild May International		\$2,632,588.25
Uganda	Teso Gospel Foundation		\$19,898.16
Uganda	Uganda Muslim Tabliq		\$25,171.10
Uganda	Uganda Catholic Secretariat		\$102,229.32
Uganda	Uganda Muslim Rural Development Association (UMURDA)		\$36,026.92
Uganda	Uganda Protestant Medical Bureau		\$21,617.58
Uganda	Watoto Child Care Ministries – Kampala Pentecostal Church		\$611,229.45
Uganda	World Vision		\$149,903.33
Zambia	Churches Health Association of Zambia	\$4,764,261.89	\$1,463,717.06
Zambia	Diocese of Ndola		\$464,195.24
Zambia	Kabwe Adventist Family Health Institute		\$369,894.36
Zambia	Mindolo Ecumenical Foundation		\$254,382.33
Zambia	Diocese of Mansa		\$251,665.04
Zambia	Diocese of Monze		\$195,967.95
Zambia	Evangelical Fellowship of Zambia		\$183,705.11
Zambia	Diocese of Mongu		\$138,122.77
Zambia	Expanded Church Response		\$131,224.99
Zambia	Council of Churches in Zambia		\$118,766.54
Zambia	Diocese of Chipata		\$115,264.25
Zambia	Monze Mission Hospital		\$102,964.71
Zambia	Zambia Inter-Faith Networking Group		\$93,743.19
Zambia	Henwood Foundation		\$86,118.33
Zambia	YWCA		\$67,218.86
Zambia	Youth Alive Zambia		\$50,221.65
Zambia	UCZ Presbytery		\$43,578.35
Zambia	Mbereshi Mission Hospital		\$36,402.21
Zambia	Envirogreen Association of Zambia		\$25,565.81

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Zambia	Lubwe Mission Hospital		\$32,354.54
Zambia	Mambilima Mission Hospital		\$31,058.11
Zambia	Mpongwe Mission Hospital		\$26,328.84
Zambia	Mtendere Mission Hospital		\$22,731.75
Zambia	Chibula Mission Hospital		\$22,502.04
Zambia	Loloma Mission Hospital		\$22,500.08
Zambia	Neelam		\$21,202.55
Zambia	Mphunde Regional Health Center		\$19,418.21
Zambia	Diocese of Solwezi		\$19,410.72
Zambia	Katondwe Mission Hospital		\$18,783.94
Zambia	Nyamphande Regional Health Center		\$21,097.99
Zambia	Mukinge Mission Hospital		\$17,754.33
Zambia	St. Paul's Kashikishi Mission Hospital		\$17,638.18
Zambia	Zimba Mission Hospital		\$17,555.53
Zambia	St. Luke's Mission Hospital		\$17,204.77
Zambia	Macha Mission Hospital		\$15,350.30
Zambia	Ibenga Community HBC		\$13,299.32
Zambia	St. Anthony Regional Health Center		\$13,132.79
Zambia	Nangoma Mission Hospital		\$12,651.57
Zambia	Chipembi Regional Health Center		\$12,592.53
Zambia	St. Mary's Regional Health Center		\$12,512.86
Zambia	Prisons Fellowship of Zambia		\$11,613.47
Zambia	Coptic Hospital		\$11,072.65
Zambia	ICOZ		\$10,930.32
Zambia	Nyanje Mission Hospital		\$10,916.67
Zambia	Fiwale Regional Health Center		\$10,085.87
Zambia	Minga Mission Hospital		\$10,020.79
Zambia	Chishere Homes		\$8,539.21
Zambia	Mwami Mission Hospital		\$7,278.85
Zambia	Kwenuwa Women Association		\$6,6649.28
Zambia	St. Francis Hospital		\$6,109.84
Zambia	Mulungushi Regional Health Center		\$5,783.96
Zambia	Dawn Trust Community Care		\$5,681.65
Zambia	Simwatachela Regional Health Center		\$5,106.89

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Zambia	Kayami Regional Health Center		\$4,986.96
Zambia	Kafulafuta Regional Health Center		\$4,923.46
Zambia	Luawu Regional Health Center		\$4,611.23
Zambia	Isubilo Community Centre		\$4,554.30
Zambia	Mulanga Regional Health Center		\$4,371.43
Zambia	Chilubula Mission Hospital		\$3,712.93
Zambia	Chinika House		\$2,846.44
Zambia	Zamani Isipo Support		\$2,664.98
Zambia	Njase Regional Health Center		\$2,052.71
Zambia	Incommunity Care for Orphans		\$1,934.40
Zambia	Mupapa Regional Health Center		\$1,878.06
Zambia	Sachibondu Regional Health Center		\$1,878.06
Zambia	Kalene Mission Hospital		\$1,845.24
Zambia	St. Luke's Mission Hospital		\$1,728.55
Zambia	Kaparu Regional Health Center		\$683.15
Zambia	Churches Health Association of Zambia	\$916,617.33	\$574,300.68
Zambia	Kalene		\$27,640.62
Zambia	Mtendere Mission Hospital		\$26,881.47
Zambia	Chikuni Mission Hospital		\$23,941.28
Zambia	Lumezhi Mission Hospital		\$23,630.37
Zambia	Chilubula Mission Hospital		\$19,188.03
Zambia	Mupapa Bendet Project		\$18,670.84
Zambia	Kayambi Mission RHC		\$16,056.20
Zambia	Lukolwe Mission Hospital		\$15,519.94
Zambia	Mpunde RHC		\$15,519.94
Zambia	St. Luke's Mission Hospital		\$14,929.66
Zambia	Mulanga Regional Health Center		\$14,920.56
Zambia	Mulungushi Regional Health Center		\$14,020.23
Zambia	Monze Mission Hospital		\$12,283.70
Zambia	Chingombe Mission Hospital		\$12,146.59
Zambia	Chivuna Mission Rural Health Centre		\$6,481.62
Zambia	Sikalongo Mission Health Centre		\$6,455.84

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Zambia	Minga Mission		\$6,232.19
Zambia	Katondwe Mission Hospital		\$4,196.29
Zambia	Nyanje Mission Hospital		\$3,961.54
Zambia	Chabbobboma Mission RHC		\$3,668.09
Zambia	Jagaimo Mission Regional Health Center		\$3,668.09
Zambia	Kalichero (Muzeyi) Mission Rural Health Centre		\$3,668.09
Zambia	Lubwe Mission Hospital		\$3,668.09
Zambia	Mangango Mission Hospital		\$3,668.09
Zambia	Masuku Mission Rural Health Centre		\$3,668.09
Zambia	Mbereshi Mission Hospital		\$3,668.09
Zambia	Mumbezhi Mission Regional Health Center		\$3,668.09
Zambia	Mwandi Hospital Tuberculosis Global		\$3,668.09
Zambia	Namwianga Regional Health Center Malaria		\$3,668.09
Zambia	Siamwatachela Regional Health Center		\$3,668.09
Zambia	Sichili Mission Hospital		\$3,668.09
Zambia	Yuka Mission Adventist Hospital		\$3,668.09
Zambia	Kasaba Mission Hospital (St. Margrets)		\$3,521.37
Zambia	Mambwe Mission Regional Health Center		\$3,081.20
Zambia	Kanyanga Mission Health Centre		\$2,878.75
Zambia	St. Joseph Regional Health Center		\$2,564.10
Zambia	Churches Health Association of Zambia	\$3,036,406.40	\$2,132,124.92
Zambia	Anglican Diocese of Mansa		\$27,397.44
Zambia	Mpongwe Mission Hospital		\$22,066.95
Zambia	Prisons Fellowship		\$21,954.42
Zambia	St. Paul Hospital		\$21,878.92
Zambia	Mishikishi Regional Health Center		\$21,821.94
Zambia	Namwianga Regional Health Center		\$21,608.26
Zambia	Simwatachela Regional Health Center		\$21,578.06
Zambia	Nangoma Regional		\$21,280.63

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
	Health Center		
Zambia	Mtendere Mission Hospital		\$20,965.81
Zambia	Mbereshi Hospital		\$19,771.79
Zambia	St. Margaret's Mission Hospital		\$19,149.29
Zambia	Lukolwe Mission Regional Health Center		\$18,535.33
Zambia	St. Theresa Mission Hospital		\$18,049.86
Zambia	Mankunka Regional Health Center		\$17,860.40
Zambia	Chipili Regional Health Center		\$16,864.74
Zambia	Lubwe Mission Hospital		\$16,686.32
Zambia	Kafulafuta Mission Regional Health Center		\$16,049.86
Zambia	Mpunde Regional Health Center		\$15,810.54
Zambia	Chipembi Regional Health Center		\$15,611.11
Zambia	Mupapa Bendet Project		\$15,609.40
Zambia	Zimba Mission		\$15,392.88
Zambia	Mangango Mission Hospital		\$15,125.36
Zambia	Sikalongo Regional Health Center		\$14,928.49
Zambia	Kaparu Regional Health Center		\$14,237.61
Zambia	Sachibondu Regional Health Center		\$14,165.31
Zambia	St. Anthony Mission		\$13,844.73
Zambia	St. Joseph Mission Hospital		\$13,844.73
Zambia	Mumbezhi Regional Health Center		\$13,639.32
Zambia	Katondwe Mission Hospital		\$13,593.73
Zambia	Santa Maria Mission Hospital		\$13,562.68
Zambia	Njase Regional Health Center		\$13,503.99
Zambia	Luampa Mission Hospital		\$13,415.95
Zambia	Mulungushi Regional Health Center		\$12,968.66
Zambia	Chilubula Hospital		\$12,858.69
Zambia	St. Luke Hospital Mphanshya		\$12,780.70
Zambia	Mungwi Regional Health Center		\$12,535.61
Zambia	St. Mary Regional Health Center		\$12,420.23

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Zambia	Nyampande Regional Health Center		\$11,995.73
Zambia	Chikankata Hospital		\$11,318.02
Zambia	Fiwale Regional Health Center		\$11,109.69
Zambia	Chabbobboma Regional Health Center		\$10,769.23
Zambia	Mwami Hospital		\$10,547.36
Zambia	Catholic Diocese of Chipata		\$10,400.28
Zambia	Kafue Mission Regional Health Center		\$10,354.70
Zambia	Sichili Mission Hospital		\$10,314.81
Zambia	Chivuna Regional Health Center		\$9,972.93
Zambia	Masuku Mission Regional Health Center		\$9,824.50
Zambia	Mwandi Hospital		\$9,712.25
Zambia	Siachitema Regional Health Center		\$9,686.61
Zambia	Loloma Mission		\$9,685.19
Zambia	Mambilima Mission Hospital		\$9,538.46
Zambia	Ipafu Regional Health Center		\$9,401.71
Zambia	Nyanje Hospital		\$9,355.84
Zambia	Foundation of Community Action		\$9,097.22
Zambia	Monze Mission Hospital		\$8,988.60
Zambia	Kutemwa Ndikusamala Ministries		\$8,339.03
Zambia	Chinyingi Mission Regional Health Center		\$7,727.64
Zambia	Jacaimo Regional Health Center		\$7,434.18
Zambia	National Baptist		\$7,407.41
Zambia	St. Francis Hospital		\$5,938.82
Zambia	Chikuni Mission Regional Health Center		\$5,585.47
Zambia	Kalichero Regional Health Center Tuberculosis		\$5,585.47
Zambia	Good Shepherd Prison Ministries		\$5,135.33
Zambia	Lwawu Mission Hospital		\$4,823.72
Zambia	Kamoto Hospital		\$4,592.59
Zambia	Community Based Tuberculosis Programme		\$4,586.89
Zambia	Sitoti Regional Health Center		\$4,558.40
Zambia	Kalene Regional Health		\$4,548.43

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
	Center		
Zambia	Illondola Regional Health Center		\$4,501.42
Zambia	Chinika House (Sacred Heart Sisters)		\$3,595.44
Zambia	Macha Hospital		\$3,418.80
Zambia	Sioma Mission Hospital		\$3,133.90
Zambia	Chilonga Mission Hospital		\$1,760.68
Zambia	Mambwe Mission Regional Health Center		\$1,555.27
Zambia	Minga Hospital		\$1,424.50
Zambia	Muzeyi Regional Health Center		\$1,424.50
Zambia	Lumezi Mission Hospital		\$880.34
Zambia	Yuka Mission Hospital		\$880.34
Zambia	Churches Health Association of Zambia	\$3,668,853	\$1,692,408.17
Zambia	Chilanga Hospice Lusaka		\$108,221.37
Zambia	Chipembi Hospital		\$20,945.09
Zambia	Coptic Hospital Lusaka		\$127,673.49
Zambia	Loloma Mission Hospital		\$126,853.06
Zambia	Lubwe Mission Hospital		\$103,492.95
Zambia	Mbereshi Mission Hospital		\$111,702.27
Zambia	Monze Mission Hospital		\$199,498.88
Zambia	Mpongwe Mission Hospital		\$150,010.27
Zambia	Mwami Mission		\$183,216.94
Zambia	Nangoma Mission		\$136,403.56
Zambia	Nyanje Mission Hospital		\$133,753.35
Zambia	St. Fidelis Chilubula		\$161,589.67
Zambia	St. Luke's Mission Hospital		\$107,225.51
Zambia	St. Paul's Kashikishi Mission Hospital		\$181,223.95
Zambia	Zimba Mission		\$124,643.48
Zambia	Churches Health Association of Zambia		\$426,456.24
Zambia	Churches Health Association of Zambia	\$2,333,978.75	\$1,656,645.19
Zambia	Fiwale Regional Health Center		\$15,253.41
Zambia	St. Theresa		\$14,476.70
Zambia	Mpongwe Mission Hospital		\$13,305.52
Zambia	St. Anthony		\$12,806.80
Zambia	Kafue Regional Health Center		\$12,728.89
Zambia	Ipafu Regional Health Center		\$11,202.01

Country	Organization	Principal Recipient Amount	Sub-Recipient Amount
Zambia	Zimba Mission Health		\$9,662.70
Zambia	Kanyanga Regional Health Center		\$8,906.55
Zambia	Mtendere Mission Health		\$7,707.72
Zambia	Mulanga Regional Health Center		\$7,692.08
Zambia	Mwami Adventist Hospital		\$5,803.26
Zambia	Nangoma Mission Health		\$4,590.84
Zambia	Lukolwe Regional Health Center		\$4,173.99
Zambia	St. Paul's Mulungushi		\$4,042.27
Zambia	Macha Mission Health		\$3,619.89
Zambia	Loloma Mission Health		\$3,532.47
Zambia	Kaparu Regional Health Center		\$3,310.21
Zambia	Mpunde Regional Health Center		\$3,133.02
Zambia	Mpanshya Mission Hospital		\$3,034.13
Zambia	St. Joseph		\$2,901.63
Zambia	Kafulufuta Regional Health Center		\$2,801.57
Zambia	Luampa Mission Hospital		\$2,601.46
Zambia	Mishikishi Regional Health Center		\$2,401.35
Zambia	St. Kalemba		\$1,262.84
Zambia	Chipembi Regional Health Center		\$708.75
Zambia	Chinyingi Mission Hospital		\$332.23
Zambia	St. Kalemba Mission Hospital		\$332.23
Zambia	St. Paul's Mulungushi		\$310.08
Zambia	Chingombe Regional Health Center		\$155.04
Zanzibar (Tanzania)	Unspecified FBO		\$87,574.90
Zimbabwe	Zimbabwe Association of Church Related Hospitals		\$1,783,525

Appendix 3: Distributions of Drugs and Commodities to Global Fund Faith-Based Principal Recipients

**Tables provided by the Global Fund Secretariat*

Distribution of Commodities, including Sites that Distribute Anti-Retrovirals, Supplies that offer Voluntary Counseling and Testing Sites, Motor Vehicles, and Supplies for Orphan Care in Mainland Tanzania

Entity	ARV Sites	VCT Sites	Motor Vehicles	Orphan Care
Government	109 (54 percent)	439 (93 percent)	59 (65 percent)	0
Faith-Based	65 (33 percent)	22 (5 percent)	12 (13 percent)	6 (46 percent)
Private	26 (13 percent)	0	0	0
NGO	0	10 (2 percent)	20 (22 percent)	7 (54 percent)

Disbursements of Artemisinin-Combination Therapies in Tanzania from Global Fund Resources

Hospital	Type	Total	Percent
District Hospitals	Government	976,085	60.7
Regional Hospitals	Government	96,005	6.0
Consultant Hospitals	Government	42,485	2.6
Voluntary Agency Hospitals and Designated District Hospitals	Faith-Based	493,030	30.7
Total		1,607,605	100

Appendix 4: Faith-Based Representatives on Global Fund Country Coordinating Mechanisms (CCMS)

**Tables provided by the Global Fund Secretariat*

Global and Regional Analysis of Faith-Based Representation in CCMS

Region	Total # of CCM Members	Total # of faith-based representation on CCMS	Percentage of FBO representation of total membership
East Asia and the Pacific	378	25	6.6%
Eastern Africa	313	27	8.6%
Eastern Europe	697	22	3.2%
Latin America and Caribbean	520	22	4.2%
Middle East and North Africa	499	30	6%
South and East Asia	254	13	5%
Southern Africa	200	15	7.5%
West and Central Africa	634	54	8.5%
Total	3,495	208	6%

List of Faith-Based Representatives who are Members of Global Fund CCMS – Listed Alphabetically by Country

Country	Name	Organization	Title
Algeria	M. Abderahmane Arar	Algerian Muslim Scouts	President
Angola	Ernesto Afonso Rene	Rede Esperança (National Network of FBOs)	Executive Secretary
Armenia	Mark Kelli	World Vision International	National Director
Azerbaijan	Mrs. Narmin Efendiyeva	World Vision International	Health Coordinator
Bangladesh	Sukomal Barua	Buddhist Religious Welfare Trust	Secretary
Bangladesh	Swami Sthiratmahananda	Ram Krishna Mission	Assistant Secretary
Bangladesh	Dr. Khizir Hayat Khan	Islamic Foundation	Deputy Director
Bangladesh	Mrs. Maya D. Roazario	CARITAS	Director of Health
Belarus	Mr. Nikolai Matrunchik	Brotherhood of Vilmo Martyrs	Chair
Belize	Canon Leroy Flowers	Belize Council of Churches	President
Benin	Soulé Goube	Organisation de la Communauté Religieuse Musulmane	Secrétaire chargé de Mission de l'Imam de la Mosque Centrale de Cadjèhoun

Country	Name	Organization	Title
Benin	Abbé Désiré Atonde	Conférence Episcopale de l'Église Catholique du Bénin	Médecin Coordonnateur Sanitaire Diocésain
Benin	Pasteur Simon Dossou	L'Église Protestante Méthodiste du Benin	President
Bhutan	Mr. Tashi Galay	Dratshang Iheritsho	Project Manager
Bosnia and Herzegovina	Nela Levi-Hasic	Jevrejska Zajednica – Jewish Organization	Member
Bosnia and Herzegovina	Remzija Pitic	Rijaset Islamske Zajednice – Muslim Organization	Member
Bosnia and Herzegovina	Vanja Jovanovic	Srpska Pravoslavna Crkva – Serbian Orthodox Organization	Priest
Botswana	Irene Kwape	Botswana Christian AIDS Intervention Programme	Director
Brazil	Mr. José Maria	Pastoral de Saúde	Representative
Brazil	Mr. Manfred Gobel	German Leprosy and Tuberculosis Relief Association (DAHW)	Director in Brazil
Brazil	Ms. Zilda Arns Neumann	Pastoral de Criança	Representative
Burkina Faso	Mr. David Lompo	RCN Evangélique	Representative of Protestant Churches
Burkina Faso	Mr. El Hadj Moussa Bambara	Coordination Islam	Representative of the Muslim coordination of actions against AIDS
Burkina Faso	Père François Sedgo	RCN Catholique	Representative of Catholic community
Burkina Faso	Mr. Poé Naba Justin Compaore	RCN – Chefs Cout. Trad.	Representative of traditional religious organization
Burundi	Issa Salum Bagoribarira	Communauté Islamique du Burundi (COMIBU)	Representative
Burundi	Monsignor Blaise Nzeyimana	Conférence des Evêques Catholiques du Burundi	Representative
Burundi	Mme. Perpétue Kankindi	Conseil National des Églises	Representative
Cambodia	Ms. Peggy Cook	United Reformed Church	Country Director
Cameroon	Hamadou El Hadj Banouffe	Association Culturelle et Islamique du Cameroun	Secretary-General
Cameroon	Dr. Jean-Rober Mbessi	Conférence Episcopale National du Cameroun	Coordinateur
Cameroon	Mr. John Essobe	Conseil des Églises Protestantes du Cameroun	Executive Secretary, Department of Health
CARICOM	Ms. Elizabeth	Caribbean Council of	Regional Coordinator

Country	Name	Organization	Title
	Nicholas	Churches	
Central African Republic	Aminou Mamadou	Communauté Musulmane	Secrétaire Général Adjoint Mosquée Centrale Bangui
Central African Republic	Mamadou Nali	Églises Protestantes	National Coordinator
Central African Republic	Monseigneur Paulin Pomodimo	Comité Episcopal National Face au SIDA	Archevêque
Central African Republic	Michel Koch Komba	Association des Œuvres Médicales des Églises pour la Santé en Centrafrique (ASSOMESCA)	Secretary General
Chad	Bactar Yola	Alliance of Evangelical Churches and Missions of Chad (EEMET)	Member
Chad	Bénayal Ndoloum	EEMET	Medical Coordinator
Chad	Monique Mohonodjial	Église Catholique	Member
Chad	Cheikh Abdadaïm Ousmane Abdoulaye	Conseil Supérieur des Affaires Islamiques	Member
Comoros	Mr. Mohamed Mohamed Ahmed	MOUFTORAT	Directeur du Cabinet du Grand Moufti
Congo (Brazzaville)	Père Bernard Diafouka	Coordination des Confessions Religieuses contre le SIDA	Secretary-General
Côte d'Ivoire	Imam Mamadou Dosso	Forum des Confessions Religieuses	Porte Parole
Democratic Republic of the Congo	M. Jean Paul Divengi	Église du Christ au Congo (Église Protestante)	Président de la commission de la lutte contre la maladie
Democratic Republic of the Congo	M. David Nku Imbie	Armée du Salut	Médecin Directeur
Democratic Republic of the Congo	M. Gamal Gamal Sheih	Communauté Musulmane	President
Democratic Republic of the Congo	M. John Gikapa	Église du Christ au Congo	Coordinateur Projet SIDA
Democratic Republic of the Congo	M. Kankienza Muana Mbo	Conseil des Églises de veille	President
Democratic Republic of the Congo	M. Zacharie Beya	Église Catholique	Secrétaire Général Adjoint
Djibouti	Mr. Mohamoud Robleh	Religious Charity Association (ALBIR)	General Secretary
Dominican Republic	Sr. Braulio Portes	Consejo Nacional de Iglesias	Presidenta

Country	Name	Organization	Title
Egypt	Dr. Youssef Wahba	CARITAS	Country Director
Egypt	Mrs. Sohair Aziz	Coptic Evangelical Organization for Social Services	Member
El Salvador	Concepción Rebollo de Herrera	Universidad Evangélica de El Salvador	Docente
El Salvador	Dr. Ana Isabel	CARITAS Salvador	Sub Director de Promoción Humana y Habitat
Equatorial Guinea	Javier Mba	Catholic Church of Equatorial Guinea	Representative
Equatorial Guinea	Próspero David Sharpe	Methodist Church of Equatorial Guinea	President
Eritrea	Bishop Mengisteab Tesfamariam	Catholic Church of Eritrea	Bishop
Estonia	Kaia Kapsta	Estonian Council of Churches	Member of Council
Ethiopia	Dr. Nigussu Legesse	Ethiopian Interfaith for Development, Dialogue and Action	Commissioner
Ethiopia	Mr. Kebede Asrat	Christian Relief Development Association	Executive Director
Gabon	Monseigneur Basile Mve Engone	Église Catholique	Archévêque
Gabon	Pasteur Judes Benjamin Ngoua	Mouvement Evangélique et Pentecôtiste	Pasteur et president du mouvement
Gabon	Pasteur Gaspard Obiang	General Civil Society	Member
Gabon	Dr. Sylver Aboubakar Minko-Mi-Nseme	Conseil Supérieur des Affaires Islamique du Gabon	Secrétaire Général adjoint
Gambia	Alhagie Banding Drammeh	Gambia Supreme Islamic Council	President
Gambia	Benjamin Safari	Catholic Relief Services	Country Director
Gambia	Eustace Cassell	Christian Children Fund	Country Director
Gambia	Willy Carr	The Gambia Christian Council	Secretary-General
Georgia	Vakhtang Akhaladze	Patriarchate Public Health Department	Head
Ghana	Philibert Kankye	Christian Health Association of Ghana	Executive Secretary
Ghana	Rev. Adukei Hesse	Executive Health Care Consult, Ltd.	Chief Executive
Guatemala	Reynia de León de Contreras	Global Vision Foundation/World Vision International	
Guinea	Alberto Zamberlette	CARITAS	Director
Guinea	Eduardo	Community of	Program Coordinator

Country	Name	Organization	Title
	Monteverde	Sant'Egidio	
Guinea	El Hadj Ibrahima Bah	Fayçal Mosque	Imam Ratib
Guinea	Monsignor Albert Gomez	Anglican Church	Bishop
Guinea	Mme. Cissé Hadja Mariama Sow	Association des femmes Oulémas de Guinée	Chair
Guinea	Mme. Marthe I. Bouré	Union des femmes Chrétiennes de Guinée (Union of Christian Women in Guinea)	Chair
Guinea-Bissau	Ausenda Cardoso	CARITAS	Representative
Guinea-Bissau	Ença Jandi	Al-Ansars	Representative
Guinea-Bissau	Guilherme Sila	Community of Sant'Egidio	Coordinator
Guyana	Mr. R. Alphonso Portor	Guyana Council of Churches	Pastor
Haiti	Mr. Hubert Morquette	Église Protestant	Representant Secteur Protestant
Haiti	Ms. Marie José Victor Joseph	Église Episcopale	Tresoriere
Honduras	Lissette Cubillo	Confraternidad Evangélica de Honduras	
India	Dr. Jayaraj Devadas	German Leprosy and Tuberculosis Relief Association (DAHWA)	Director
India	Dr. Ravi Raj William	Christian Council for Rural Development and Research (CCOORR)	Director
Indonesia	Dr. Atikah M Zaki	PP Muhammadiyah Aisyah	Vice Chairperson of Health Division
Indonesia	Dr. Syahrizal Syarief	National Board of Nadlatul Ulama (Islamic Faith-Based Organization)	Chairman of Health Institute
Indonesia	Dr. Tiene A. Tombokan	PGI (Communion of Churches in Indonesia)	Health Consultant
Iran	Mr. Saedi		FBO Representative/Supportive Role
Iraq	Blassem Hassan Hammadi Al Khaffasi		Representative on Religion Matters
Jamaica	Delores Brissett	Bethel Baptist Church	Coordinator
Kenya	Abdulattif Shaban	Supreme Council of Kenyan Muslims (SUPKEM)	Director-General
Kenya	Dr. Samuel Mwenda	Christian Health Association of Kenya (CHAK)	Secretary-General

Country	Name	Organization	Title
Kenya	Fr. Vincent Wambugu	Catholic Secretariat	Chairman
Kosovo	Kasim Gërguri	Kosovo Islam Community	Head of Finance
Kyrgyzstan	Mr. Murat Ali Zhumanov	Spiritual Office of Muslims of the Republic of Kyrgyzstan	Azreti Mufty
Lao People's Democratic Republic	Venerable Bouakham Sarybouth	Lao Buddhist Association	Vice President
Lesotho	Mr. John Shumnlasky	Catholic Relief Services	Director
Liberia	Mrs. Ellen G. Williams	Christian Health Association of Liberia	Executive Director
Liberia	Pastor Moses Gobah	Lutheran Church of Liberia	Pastor
Liberia	Sheik Mohammed Sheriff	Muslim Council of Liberia	Head
Liberia	Sister Barbara Brillant	Mother Patern College of Health Science	Dean
Macedonia	Mahir Hiseni	El Hilal	Representative
Macedonia	Muhamer Veseli	Islamic Community	Representative
Macedonia	Zarko Gorgievski	Macedonian Orthodox Church	Representative
Macedonia	Dr. Zoran Stojanov	Catholic Church	Representative
Madagascar	Jeanne Razafinjanahary	Église Catholique Apostolique Romaine	Coordonnateur de la Commission Episcopale de la Santé
Madagascar	Joséphine Rasoampamonjy	Église Luthérienne	
Malawi	Ruth Mwandira	Christian Health Association of Malawi	Executive Director
Malawi	Pastor Mac Arthur Baxter Natulu	AID Alternative Christian Charitable Organization	Director
Maldives	Ashaikh Mohamed Faaiz Moosa	Supreme Council of Islamic Affairs	Mushrif Mussaidh
Mali	El Hadj Sidi Konake	AMUPI (Malian Association for Unity and the Progress of Islam)	Sec. Administratif
Mongolia	Batnairamdal Chuluun	Buddhist Leadership Initiative Project, Daschchoiling Monastery	Lama
Montenegro	Marko Djelovic	CARITAS	Program Coordinator
Montenegro	Nikola Gačević	Serbian Orthodox Church	Deacon
Mozambique	Rev. Eliás Massicame	Christian Council of Mozambique	National Coordinator
MWP (Pacific Community Multi-	Ragu Fong	Pacific Conference of Churches	Finance Officer and Acting Secretary-General

Country	Name	Organization	Title
Country)			
MWP (Pacific Community Multi-Country)	Arthur Pihigira	National Council of Churches	Chairman
Namibia	Rev. Phillip Strydom	Council of Churches Namibia	Executive Board Member
Nicaragua	Damaris Albuquerque	Council of Protestant Churches of Nicaragua	Directora Ejecutiva
Nicaragua	Harold Campos	Vicariato Apostólico de Bluefields	
Nicaragua	Marisol Rueda	CARITAS de Nicaragua	Representante de Salud
Niger	Cheik Ali Alassane	Association Islamique du Niger	
Niger	M. Christian Issifi	Communauté Chrétienne	Representative
Nigeria	John Otubu	Christian Organisation of Nigeria	Member of the Executive
Nigeria	Klaus Gilgen	German Leprosy and Tuberculosis Relief Association (DAHW)	Coordinator
Nigeria	Musa Ihejeto	National Supreme Council of Islamic Affairs	Head Administration
Pakistan	Dr. Syed Hassan Rizvi	Islamic Research Center	Director-General
Pakistan	Mr. Hector Nihal	AIDS Awareness Society (AAS)	President
Papua New Guinea	Dominica Abo	Anglicare Stop AIDS	Director
Papua New Guinea	Don Bradford	World Vision	Director
Papua New Guinea	Luke Keria	Hope Worldwide	Director
Papua New Guinea	Pastor Daniel Hewali	NCD FBO Network, NCD PAC	Vice Chairperson
Papua New Guinea	Mr. Vincent Michael	Churches Medical Council	Executive Officer
Paraguay	Werner Janz	Evangelical Mennonite Association	Administrator of the Mennonite Hospital
Peru	Sister Sandra Flores	Departamento de Pastoral de Salud de la Iglesia Católica Romana	
Peru	Rev. David Limo	Centro Parroquial Ecuménico Rosa Blanca	
Philippines	Dr. Elmer Garcia	Couples for Christ – Gawad Kalusugan	Director
Philippines	Dr. Melvin Magno/Marlon Villaneuva	World Vision Development Foundation (WVDF)	National Health Advisor

Country	Name	Organization	Title
Philippines	Mr. Charles Malcolm Induruwage	Salvation Army	President
Romania	Mark Ohanian	International Orthodox Christian Charities	
Rwanda	Abbé Oreste Incimatata	CARITAS	General Secretary
Rwanda	Aurea Mujawimana	Umbrella of Religious Organizations Against HIV/AIDS	Executive Secretary
Sao Tome and Principe	Máximo Aguiar	CARITAS	Chair/Community Representative
Sao Tome and Principe	Sister Fernanda R. Da Silva		Catholic Church Sister
Senegal	El Hadj Ousmane Gueye	Réseau des religieux Islam SIDA / Santé / Education	President
Senegal	Jean-Gabriel Carvalho	World Vision	Operations
Senegal	Paul Sagna	Alliance des Religieux	Coordonnateur du Secrétariat Permanent
Serbia	Hadzi-Ljubodrag Petrovic	Serbian Orthodox Church	Priest
Serbia	Jarmila Bujak Stanko	Ecumenical Humanitarian Organization	Coordinator
Serbia	Dragan Terzic	St. Archangel Gavriilo Parish	Head
Sierra Leone	Al-Shiek Ahmed	Inter-Religious Council	Chief Imam
Sierra Leone	Mr. Brian Gleeson	Catholic Relief Services	Country Representative
Sierra Leone	Mrs. Antoinette Fergusson	German Leprosy and Tuberculosis Relief Association (DAHWA)	Country Representative
Solomon Islands	Mrs. Doris Bava	Mother's Union (Anglican Church)	Trainer on HIV Program
Solomon Islands	Mrs. Judith Fanangalasu	Solomon Island Christian Association	Secretary
South Africa	Rev. Desmond Lambrechts	Anglican AIDS	
Sri Lanka	Dr. Lalith Chandradasa	Lanka Jatika Sarvodaya Shramadana Sangamaya	Director of Community Health
Sri Lanka	Ms. Shirley Tissera	Congress of Religions	Coordinator
Sudan	Chris Smoot	Adventist Development and Relief Agency	Country Director
Sudan	Debie Shomberg	Catholic Relief Services	Health Coordinator
Sudan	Ibrahim Mohamed Hassian	Islamic African Relief Agency (IARA)	
Sudan	Jan Gerrit van Norel	ZOA Refugee Care	Country Director
Sudan	Lina Sala	Diocese of Rumbek	Medical Coordinator

Country	Name	Organization	Title
Sudan	Myron Jespersen	World Relief	Country Director
Sudan	Thomas Mulhearn	World Vision	Country Director
Sudan	Dr. Kediene M. Alek	Sudanese Council of Churches	Medical Coordinator
Sudan	Rev. Peter Tibi	New Sudan Council of Churches	Deputy Executive Secretary
Sudan	Fatima Abdelaziz	Norwegian Church Aid	Gender Officer
Sudan	Jobst Koehler	German Leprosy Mission (GLRA/DAHW)	Country Representative
Sudan	Lino Baba	Sudan Council of Churches	President
Sudan – Southern Sector Sub-CCM	Paul Townsend	Catholic Relief Services	Country Representative
Sudan – Southern Sector Sub-CCM	Chris Smoot	Adventist Development and Relief Agency	Country Director
Sudan – Southern Sector Sub-CCM	Lina Sala	Diocese of Rumbek	Medical Coordinator
Sudan – Southern Sector Sub-CCM	Myron Jespersen	World Relief	Country Director
Sudan – Southern Sector Sub-CCM	Jan Gerrit van Norel	ZOA Refugee Care	Country Director
Suriname	Mr. Nico Waagmeester	Inter-Religious Council of Suriname	President
Suriname	Mrs. Cynthia Rozenblad	Medical Mission	Chair
Swaziland	Thandiwe Dlamini	Swaziland Church Forum	Board Member
Swaziland	Rev. Senzo Hlatshwayo	Coordinating Assembly of Non-Governmental Organizations (representing World Vision)	Chairperson of the Board
Tajikistan	Mr. M. Davlatov	State Religions Committee	Chairperson
Tanzania	Mr. Suleiman Lolila	National Muslim Council Tanzania	HIV/AIDS Coordinator
Tanzania	Dr. Adeline Kimambo	Christian Social Services Commission	Director
Thailand	Ms. Somthong Srisudhivong	Interfaith Network on AIDS in Thailand (INAT)	Representative
Timor-Leste	Jason Belanger	Catholic Relief Services	Country Representative
Timor-Leste	Mrs. Inácia M. dos S. Fátima	CARITAS Dili	Representative
Timor-Leste	Pe. Gulhermino da Silva	Catholic Church in Timor-Leste	Representative
Timor-Leste	Rev. Framzelino de Jesús	Protestant Church in Timor-Leste	Representative

Country	Name	Organization	Title
Timor-Leste	Sr. Arief Abdullah Sagan	Muslim Community in Timor-Leste	President
Timor-Leste	Rev. Daniel Marcal	National AIDS Commission (representing Church World Service)	CCM President
Togo	Dr. Kokusè Daniel Adossi	Médecin	Église Evangélique Presbytérienne
Togo	Prof. Bouraïma Sopho Boukari	Union Musulmane du Togo	Vice Président Chargé de la santé, l'éducation et la jeunesse
Togo	Rev. Mariam Schwarck	OCDI Nationale (Organisation pour la Charité et le Développement Integral)	Secrétaire Général
Uganda	Sam Orach	United Catholic Medical Board (UCMB)	Assistant Executive Secretary
Uganda	Sam Ruteikara	Inter Religious Council of Uganda	Member
Uzbekistan	Mr. Usmankhan Alimov	Religious Department of Moslems of Uzbekistan	Multi (Head)
Zambia	Pastor Webby Mwape	Community Based Tuberculosis Organisation (CBTO)	Director
Zambia	Simon Mphuka	Churches Health Association of Zambia	Executive Director
Zambia	Bishop John Mambo	Churches Health Association of Zambia	Board Member
Zanzibar (Tanzania)	Fr. Mushi Evaristus	Catholic Church	HIV/AIDS Coordinator and Priest
Zanzibar (Tanzania)	Mr. Juma Mussa Juma	Mufti Office	HIV/AIDS Coordinator
Zanzibar (Tanzania)	Mr. John Kenyi Eyobo	Anglican Church	Development Officer
Zimbabwe	Matilda Jambga	Interfaith	Chairperson
Zimbabwe	Vuyelwa Chitimbire	Zimbabwe Association of Churches Related Hospitals	Executive Director

Appendix 5: Faith-Based Organization-Focused Global Fund Publications and Workshops

**Text provided by the Global Fund Secretariat*

Publication: *Scaling up Effective Partnerships: A Guide to Working with Faith-Based Organizations in the response to HIV and AIDS*

In March 2007, the Global Fund facilitated the launch of the publication *Scaling up Effective Partnerships: A Guide to Working with Faith-Based Organizations in the response to HIV and AIDS*⁹, co-produced by Church World Service, Ecumenical Advocacy Alliance, Norwegian Church Aid, UNAIDS, and World Conference of Religions for Peace. The guide is intended to provide background information and case studies, counteract myths and give practical guidance to people who want to collaborate with faith-based organizations on joint projects related to HIV and AIDS. The launch took place in Oslo in connection with the first Meeting of the Global Fund Second Replenishment (March 6-7, 2007). The Global Fund Secretariat further supported the wide distribution of this publication, through its Fund Portfolio Managers to country partners.

Manual: *Engaging with the Global Fund to Fight AIDS, Tuberculosis and Malaria: A Primer for Faith-Based Organizations*

In May 2007, the Executive Director of the Global Fund met with representatives of FBOs in Washington, D.C. for the launch of a manual entitled, "*Engaging with the Global Fund to Fight AIDS, Tuberculosis and Malaria: A Primer for Faith-Based Organizations*," a 49-page document designed to help FBOs better engage with the Global Fund to enhance participation at multiple levels of the model. The manual was published as a joint effort between Christian Connections for International Health, World Vision International, and Friends of the Global Fight (USA).¹⁰

Workshop: *Scaling Up Involvement of Faith-Based Organizations in Global Fund Processes (April 2008, Tanzania)*

In April 2008, the Global Fund will convene a meeting in Dar Es Salaam, Tanzania with faith-based organization representatives from sub-Saharan Africa. The meeting will be the largest meeting ever organized by the Global Fund to address the specific needs of the faith-based community and to highlight the relationship which already exists. Specifically, the meeting will review:

- Contributions made so far by FBOs, either as Principal Recipients or Sub-recipients;
- Increasing recipient demand and avenues for increasing the role of FBOs as PRs and in scaling up Global Fund resourced programs;
- Better engagement of FBOs in CCMs;
- Global Fund investments with FBOs;
- FBO experience with country coordinating mechanisms, as PRs and SRs, working with vulnerable groups, and models of sub-recipient management; and,
- Global Fund perspectives on proposal processes, assessments of principal recipients and monitoring and evaluation of community-based groups.

During the conference, participants will identify strategies for increasing FBOs involvement with the Global Fund with a goal of increasing the number of FBO proposals in Round 8 and in future rounds.

Workshop: *Follow-Up Workshop during Ecumenical Pre-International AIDS Conference (July 2008, Mexico)*

As a follow-up to the April conference, in July 2008 the Global Fund will organize a workshop during the Ecumenical Pre-International AIDS Conference in Mexico City. More than 500

⁹ The publication may be downloaded at <http://www.e-alliance.ch/media/media-6695.pdf>

¹⁰ A press release about the launch may be found at http://www.ccih.org/Global_Fund/Press_Release_FBO_Global_Fund_Manual.htm and the manual may be downloaded at: http://www.ccih.org/Global_Fund/FBO.Manual.pdf

Christians from all over the world are expected to participate in plenary sessions, skills building workshops and daily worship. The workshop will relate and follow up on the outcomes of the April FBO meeting and provide key information for FBOs to access Global Fund resources .

Appendix 6: Decision Point on Dual-Track Financing

**Global Fund 15th Board Meeting*

Decision Point GF/B15/DP14:

The Board believes that civil society and the private sector can, and should, play a critical role at all levels of the architecture and within every step of the processes of the Global Fund, at both the institutional and country levels. This includes their critical roles in the development of policy and strategy and in resource mobilization at the Global Fund Board level, and in the development of proposals and the implementation and oversight of grants at the country level. The Board further expresses its desire for strengthened and scaled-up civil-society and private-sector involvement at both the country and Board levels, while recognizing the respective strengths and roles of the two sectors.

With this goal in mind – and also reaffirming the importance of effective Country Coordinating Mechanisms (CCMs)¹¹ in ensuring strong country-level development of proposals and oversight of grants – the Board recognizes the need to further enable civil society and the private sector to play their critical roles, facilitated by the following:

- The routine inclusion, in proposals for Global Fund financing, of both government and non-government Principal Recipients (PRs) for Global Fund grants (“dual-track financing”). The Board recommends the submission of proposals with both government and non-government PRs. If a proposal does not include both government and non-government PRs, it should contain an explanation of the reason for this;
- The routine inclusion, in proposals for Global Fund financing, of requests for funding of relevant measures to strengthen the community systems necessary for the effective implementation of Global Fund grants;
- The effective representation and meaningful participation of vulnerable groups (as defined in the context of each particular country) on CCMs; and
- Simplified CCM access to funding to support their effective administrative functioning, for the life of a grant that the CCM is overseeing when needed, and increased transparency by CCMs about how they plan to ensure access by civil society to such funding.

The Board requests the Secretariat to take the necessary actions and collaborate with partners to achieve the above outcomes, working with the relevant Board committee(s), where necessary.

In particular, the Board requests the Policy and Strategy Committee to agree on a suitable definition of the term “civil society,” by building on existing work to that effect.

¹¹ All references to a CCM include – in addition to a Country Coordinating Mechanism – a Sub-National CCM and a Regional Coordinating Mechanism, and in the case of a non-CCM proposal (where relevant) a grant applicant.

In addition, the Board requests the Portfolio Committee (PC) to do the following:

- Modify future proposal forms and guidelines (starting with those for Round 8) to encourage the use of dual-track financing and the inclusion of funding requests for strengthening community systems in proposals;
- Propose means to increase the representation of vulnerable groups on CCMs, such as by revising the relevant, current recommendation on the composition of CCMs;
- Propose guidance to CCMs regarding types of civil-society and private-sector representatives that could be most relevant to the work of CCMs;
- Propose appropriate modifications to the policy or guidance on the funding for CCM activities;
- Propose guidance on increasing the capacity of the Technical Review Panel in the area of civil society and the private sector; and
- Report on progress at the Sixteenth Board Meeting.

Regarding dual-track financing, the Board notes the following:

- The possible benefits achieved through dual-track financing include increased absorption capacity (from taking full advantage of the implementation capacity of all domestic sectors, both governmental and non-governmental), accelerated implementation and performance of grants, and the strengthening of weaker sectors; and
- CCMs, PRs and the Secretariat should implement dual-track financing according to the following principles:
 - The implementation should be consistent with alignment and harmonization of efforts to fight the three diseases;
 - It should be consistent with national strategies to fight the three diseases, or there should be a justification stated when this is not the case;
 - It should seek to minimize transaction costs and demands on CCMs, PRs and the Secretariat;
 - It should apply equally the same expectations of accountability, transparency and responsibility to government and non-government PRs; and
 - It should seek to be consistent with national plans for human resources for health.

The Board requests the Secretariat to consult with the Finance and Audit Committee to further analyze and refine the estimates of budgetary implications, including possible costs and savings, of this decision and report its findings to the Sixteenth Board Meeting.